



## Data Subject Processing Request Form

In respect to any of the requests set out below, ATPI require that you print this form to complete it, then submit this request electronically via mail to [DPA-Requests@atpi.com](mailto:DPA-Requests@atpi.com).

1. Article 18 of the EU General Data Protection Regulation (Regulation (EU) 2016/679) (GDPR) grants you the right to restrict certain personal data processing by ATPI, with limited exceptions.
2. Articles 12, 14 and 15 of the GDPR grants you the right to access your own personal data.
3. Article 17, and Recitals 65 and 66 of GDPR grants you the right to request the erasure of your personal data, also known as the right to be forgotten.
4. Article 16 GDPR grants you the right to correct the personal data we hold about you.
5. Article 21, GDPR grants you the right to object to data processing.
6. Article 20, GDPR grants you the right to receive a copy of your personal data or transfer your personal data to another data controller.
7. Any other data subject right under data protection or privacy law applicable to the data subject.

ATPI expect to respond to your request within one month of receipt of a fully completed form and proof of identity, except where an extension of time is required

For more information on your rights, see the ATPI Data Protection Policy available at:  
<https://www.atpi.com/en/about/privacy/>

### I. Requester Name (Data Subject) and Contact Information

Please provide the data subject's information in the space provided below. If you are making this request on the data subject's behalf, you should provide your name and contact information in Section III. The 'Data Subject' is the individual who is the subject of the data held by ATPI.

ATPI will only use the information you provide on this form to identify you and the personal data associated with your processing restriction request, and to respond to your request.

First and last name:	
Any other names that you have been known by (including nicknames):	
Home address:	
Date of birth:	

Telephone number:																	
Email address:																	
Employers name:																	
Employers address:																	
If you are a current or former employee of ATPI, please provide your employee identification number and your approximate dates of employment:																	
Nature of request (see list of 7 options on page 1)	<table border="0"> <tr> <td>1</td> <td><input type="checkbox"/></td> <td>5</td> <td><input type="checkbox"/></td> </tr> <tr> <td>2</td> <td><input type="checkbox"/></td> <td>6</td> <td><input type="checkbox"/></td> </tr> <tr> <td>3</td> <td><input type="checkbox"/></td> <td>7</td> <td><input type="checkbox"/></td> </tr> <tr> <td>4</td> <td><input type="checkbox"/></td> <td colspan="2">If selecting this option 7, please provide further detail.</td> </tr> </table>	1	<input type="checkbox"/>	5	<input type="checkbox"/>	2	<input type="checkbox"/>	6	<input type="checkbox"/>	3	<input type="checkbox"/>	7	<input type="checkbox"/>	4	<input type="checkbox"/>	If selecting this option 7, please provide further detail.	
1	<input type="checkbox"/>	5	<input type="checkbox"/>														
2	<input type="checkbox"/>	6	<input type="checkbox"/>														
3	<input type="checkbox"/>	7	<input type="checkbox"/>														
4	<input type="checkbox"/>	If selecting this option 7, please provide further detail.															

## II. Proof of Data Subject's Identity

ATPI require proof of your identity before we can respond to your data processing restriction request. To help us establish your identity, you must provide identification that clearly shows your name, date of birth, and current address. ATPI will accept a photocopy or a scanned image of one of the following as proof of identity: passport or photo identification such as a driver's license, national identification number card, or birth or adoption certificate. If you have changed your name, please provide the relevant documents evidencing the change.

If you do not have any of these forms of identification available, please contact [DPA-Requests@atpi.com](mailto:DPA-Requests@atpi.com) for advice on other acceptable forms of identification.

ATPI may request additional information from you to help confirm your identity and your data processing restriction request.

## III. Requests Made on a Data Subject's Behalf

Please complete this section of the form with your name and contact details if you are acting on the data subject's behalf.

First and last name:	
Home address:	

Date of birth:	
Telephone number:	
Email address:	

ATPI will accept a photocopy or a scanned image of one of the following (i) as proof of your identity and as (ii) proof of the data subject's identity: passport or photo identification such as a driver's license, national identification number card, or birth or adoption certificate. If you do not have any of these forms of identification available, please contact [DPA-Requests@atpi.com](mailto:DPA-Requests@atpi.com) for advice on other acceptable forms of identification. ATPI may request additional information from you to help confirm your identity if necessary.

ATPI will accept a copy of the following as proof of your legal authority to act on the data subject's behalf: a written consent signed by the data subject, a certified copy of a Power of Attorney, or evidence of parental responsibility.

ATPI may request additional information from you to help confirm the data subject's identity. ATPI reserve the right to refuse to act on your request if we are unable to verify your legal authority to act on the data subject's behalf.

#### IV. Request to Restrict Personal Data Processing

Under Article 18, you have the right to request that we restrict the processing of your personal data, subject to certain limited exceptions, when:

- You contest the accuracy of the personal data we process about you. We must restrict processing the contested data until we can verify the accuracy of your personal data.
- We are unlawfully processing your personal data.
- We no longer need to process your personal data but you need the personal data for the establishment, exercise, or defense of legal claims.
- You are objecting under Article 21(1) for processing that we:
  - consider necessary to perform a task in the public interest under GDPR Article 6(1)(e); or
  - consider necessary for ATPI's or a third party's legitimate interest under GDPR Article 6(1)(f).

If you object to processing that we perform under Articles 6(1)(e) or 6(1)(f), we will restrict the challenged processing activity pending verification of whether the ATPI's or third party's legitimate interests override your interests.

To help us process your request quickly and efficiently, please provide as much detail about the personal data you are requesting us to restrict the processing of and the above ground or grounds you are relying on for your processing restriction request:

We will contact you for additional information if the scope of your request is unclear or does not provide sufficient information for us to conduct a search (for example, if you request a processing restriction for "all information about me"). We will begin processing your restriction request as soon as we have verified your identity and have all of the information we need to locate your personal data.

Applicable law may allow or require us to refuse to act on your request, or we may have destroyed, erased, or made your personal data anonymous in accordance with our record retention obligations and practices. If we cannot comply with your processing restriction request, we will inform you of the reasons why, subject to any legal or regulatory restrictions.

V. Signature and Acknowledgment

I, \_\_\_\_\_, confirm that the information provided on this form is correct and that I am the person whose name appears on this form. I understand that: (1) ATPI must confirm proof of identity and may need to contact me again for further information; and (2) my request will not be valid until ATPI receives all the required information to process the request.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

VI. Authorized Person Signature

I, \_\_\_\_\_, confirm that I am authorized to act on behalf of the data subject. I understand that ATPI must confirm my identity and my legal authority to act on the data subject's behalf, and may need to request additional verifying information.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date]